

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER California Conference Board, Amalgamated Transit Union Issues Committee			Date of This Filing 09/28/2018	Date Stamp Page 1 of 2	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;"> CALIFORNIA FORM 497 </div> For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 971783	Report No. 27072			
STREET ADDRESS					
CITY Oakland	STATE CA	ZIP CODE 94621			
			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
			No. of Pages 2		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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LATE CONTRIBUTION REPORT

NAME OF FILER California Conference Board, Amalgamated Transit Union Issues Committee			Date of This Filing <u>09/28/2018</u> Report No. <u>27072</u> <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> No. of Pages <u>2</u>	Date Stamp Page 2 of 2	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 971783				
STREET ADDRESS					
CITY Oakland	STATE CA	ZIP CODE 94621			

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
09/28/2018	No on Prop. 6: Stop the Attack on Bridge & Road Safety, sponsored by business, labor, local govts. & transportation advocates Sacramento, CA 95815 ID# 1400937	Eliminates Recently Enacted Road Repair and Transportation Funding, Proposition 6. Statewide	\$100,000.00	11/06/2018
09/28/2018	Yes on W - San Mateo County Neighbors for Congestion Relief Burlingame, CA 94010 ID# 1407448	Adoption of a retail transaction and use tax ordinance for traffic congestion and transportation purposes. Measure W. San Mateo County	\$25,000.00	11/06/2018

Reason for Amendment: